24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Conservative Campaign Committee		
		C C00495010
Check if \times 24-hour report 48-hour report \times New report Amends report filed on		
Full Name of Payee		Date of Public Distribution/Dissemination
KTLK/iHeart Radio		10 24 2014
Mailing Address 1600 Utica Avenue S		Amount
Suite 500		7.11.00.11
City State	Zip Code	3230
Minneapolis MN	55416-1556	Transaction ID: 130965 Date of Disbursement or Obligation
Purpose of Expenditure 10/24 and 10/27 Radio Advertising	Category/ Type	10 22 / Y Y Y Y
Name of Federal Candidate	Support O	ffice Sought: House District: 00
Al Franken	Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary X General O14 Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		
		Amount
City State	Zip Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support C	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date		bisbursement For: Primary General
Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		3230.00
(b) SUBTOTAL of Unitemized Independent Expenditures)	
(c) TOTAL Independent Expenditures	······	3230.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Kelly Lawler		M = M / D = D / Y = Y = Y
Signature	cally Filed] Date	10 22 2014
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